| POSITION | INITIALS | ID NO. | DATE |
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| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 49 | 11/21/00 |
| FORMALITY REVIEW | 93 | JC 906 | 12/28/00 |
| RESPONSE FORMALITY REVIEW | Tolguest | 925 | 04-19-01 |
| | | | |

## INDEX OF CLAIMS

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| ✔ | ................................ Rejected | | N | ................................ Non-elected |
| = | ................................ Allowed | | I | ................................ Interference |
| − | (Through numeral)... Canceled | | A | ................................ Appeal |
| ÷ | ................................ Restricted | | O | ................................ Objected |

| Claim (Final / Original) | Date (10.27.02 / 27.03) | | | | | | | |
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| 1 | ✔ | ✔ | | | | | | |
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| Claim (Final / Original) | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

1st line ok
doc draw ok
At present
No claims
spec ok (applic.)